



Setti D. Warren  
Mayor

## HEALTH AND HUMAN SERVICES DEPARTMENT

Linda Walsh, Interim Commissioner

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**Public Health**  
Prevent. Promote. Protect.

### APPLICATION FOR SEASONAL FOOD ESTABLISHMENT PERMIT

The operator of each Seasonal Food Establishment must fill out this application **completely** and submit it to the Newton Health and Human Service Department at least 14 days before an event along with a **NON REFUNDABLE** fee of **\$75.00** payable to the "City of Newton". Please note that any missing information may cause a delay in the decision making process.

Date of Submission: \_\_\_\_\_

#### About your Business / Booth:

Organization / Business Name: \_\_\_\_\_

Address: \_\_\_\_\_

Owner's Name (if Applicable): \_\_\_\_\_

Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

#### About the Seasonal Event:

Name of the Event (s): \_\_\_\_\_

Date of the Event (s): \_\_\_\_\_ Time of the Event(s): \_\_\_\_\_

Address / Location of the Event (s): \_\_\_\_\_

Organizer of the Event: \_\_\_\_\_ Phone: \_\_\_\_\_

#### Contact Person in Charge (PIC) during the Event:

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Is this person a Certified Food Manager? Yes ☐ Submit copy No ☐

Does this person have an Allergy Awareness Certificate? Yes ☐ Submit copy No ☐

#### Food Information:

List **ALL** Food and Beverage items to be prepared and served. Attach a separate sheet if necessary.

(NOTE: Any changes to the menu must be submitted to and approved by the Newton Health and Human Services Department at least 5 business days prior to the event. **Only the Food items listed on the Permit**

**may be offered at the Event):** \_\_\_\_\_

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Will all Foods be prepared at a licensed Food Establishment?

Yes ☐ Provide a copy of Food Establishment Permit

No ☐ Complete Attachment A

Location of where Foods will be prepared: \_\_\_\_\_

When will Foods be prepared? \_\_\_\_\_

How and where will the Foods be stored and held? \_\_\_\_\_

Describe the number, location and set up of hand washing facilities to be used by the Seasonal Food Establishment Workers: \_\_\_\_\_

Describe how Foods will be held Cold: \_\_\_\_\_

Describe how Foods will be held Hot: \_\_\_\_\_

How will Foods be monitored during the Event? \_\_\_\_\_

Describe how Foods will be protected against environmental and customer contamination: \_\_\_\_\_

Describe where utensil washing will take place: \_\_\_\_\_

What kind of sanitizer will be used? \_\_\_\_\_

If no facilities are available on site, describe the location of back-up utensil storage: \_\_\_\_\_

Describe if and how Foods will be cooked on site: \_\_\_\_\_

Type of gloves used: \_\_\_\_\_ (Latex Gloves should not be used)

Will propane be used? Yes ☐ No ☐

If Yes obtain a Fire Permit at Fire Prevention (Headquarters) located at 1164 Centre Street, Newton MA 617-796-2230. The Seasonal Food Establishment Permit is only valid with a Propane Permit when applicable.

Will portable toilets be used?

Yes ☐ Number: \_\_\_\_\_ Company: \_\_\_\_\_

(Company must have an Offal Permit with the City of Newton)

No ☐ Describe the toilet facilities: \_\_\_\_\_

Please add any additional information about your Seasonal Food Establishment that should be considered:

Please Note: **Each cart** which has a specific function **requires a Food Permit**. Carts which are used only to store packaged foods and drinks will not be considered a separate cart. Permits are not granted on site at the Event.

**Statement:** I hereby certify that the above information is correct, and I fully understand that any deviation from the above without prior permission from the Newton Health and Human Services Department may nullify final approval and/ or permit.

Signature: \_\_\_\_\_

Print: \_\_\_\_\_

Date: \_\_\_\_\_

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**FOR OFFICIAL USE ONLY**

**Approval:** ☐

Date: \_\_\_\_\_

Restrictions: \_\_\_\_\_

None: ☐

Permit Effective Date(s): \_\_\_\_\_

**Disapproval:** ☐

Date: \_\_\_\_\_

Reason(s) for Disapproval: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Inspector's Signature: \_\_\_\_\_

Print: \_\_\_\_\_

## **GUIDELINES FOR TEMPORARY AND SEASONAL FOOD VENDORS**

In order to ensure that safe and sanitary foods are served to the public, your Temporary / Seasonal Food Permit is issued based on the following conditions:

- o Your Temporary / Seasonal Food and Propane Permit (if applicable) must be conspicuously displayed on site.  
**Only the foods stipulated on your Temporary / Seasonal Food Permit may be sold.**
- o Foods must be obtained from an approved commercial source. Proof of source such as boxes, receipts etc. must be on site and available.
- o All carts must be thoroughly pre-cleaned before set-up at the event.
- o All Potentially Hazardous Foods (PHF) such as Hot Dogs, Commercially Pre-Cooked Sausages, Hamburgers, Prepared Vegetables, must be maintained either above 135°F (Hot Holding) or below 41°F (Cold Holding).
- o Internal temperatures shall be taken to ensure the food has reached the proper cooking temperature.

### **Cooking Temperatures are as follows:**

- Commercially Processed Ready-to-Eat Foods (i.e. Hot Dogs, Pre-Cooked Sausages) - 135°F
- Hamburgers - 155°F for 15 seconds    Chicken - 165°F for 15 seconds    Pork - 145°F for 15 seconds
- Potentially Hazardous Foods (PHF) that has been cooked, cooled and reheated for Hot Holding - 165°F for 15 seconds
- o Only mechanical refrigeration or crushed / cubed ice is allowed as a cooling medium. Foods shall not come in contact with water or un-drained ice. Packaged foods may not be stored directly in ice if it is subject to the entry of water.
- o A stem type of thermometer that has been properly calibrated must be available for testing potentially hazardous foods on site. The thermometer must be cleaned and sanitized before and after use in a manner approved by the Health and Human Services Department. T-sticks may also be used.
- o All foods, drinks and condiments shall be handled and stored in a manner that prevents contamination such as using clean covered containers, storing equipment and food up off the ground etc. Trash bags are not to be used for food storage.
- o Running water with liquid soap and disposable paper towels for hand washing must be available and set-up **prior** to food preparation. Bottled water with a pull out spout is acceptable. Check with the Health and Human Services Department for other acceptable methods.
- o All food handlers shall wash their hands after utilizing the toilet facilities, smoking, eating, changing tasks, and changing gloves and / or when hands become contaminated.
- o Employees with communicable diseases which can be transmitted through food or who are experiencing vomiting and /or diarrhea must be excluded from food activities.
- o Bare hands may not contact ready-to-eat and cooked foods. Suitable utensils shall be used such as deli tissue, spatulas, tongs, single-use non-latex gloves etc. Bare-hand contact shall be minimized with foods that are not ready-to-eat.
- o All equipment, utensils, containers etc. shall be clean and in sanitary condition. A spare set of work utensils shall be available if ware washing is not available.
- o Vendors licensed to sell scooped ice cream can store scoops: in clean water that is changed every 15 minutes, in the product with the handle positioned out.
- o People handling the food shall wear clean outer garments, hair restraints, no wrist jewelry (including watches) and utilize good hygienic practices.
- o Smoking is prohibited within 10 feet of a cart or food storage area. Employee must wash their hands thoroughly with soap before returning to work.
- o A labeled spray bottle of sanitizer prepared at proper concentration must be on site and used on all Food Contact Surfaces, Utensils etc. The chemical label **MUST** state "For Use on Food Contact Surfaces". Proper concentrations should be determined with pH papers (white papers for Chlorine, orange papers for Quaternary). Follow the manufacturer's contact time.

### **Concentrations are as follows:**

- Chlorine Sanitizer: 50 – 100 PPM Depending on the chemical manufacturer instructions
- Quaternary Sanitizer: 200 PPM or 150 – 400 PPM Depending on the chemical manufacturer instructions
- Pre-mix sanitizers (Chlorine or Quaternary type) are available at restaurant equipment and supply stores.
- o Garbage and refuse shall be disposed of in a satisfactory manner. The premises shall be kept clean.

**If any of these conditions are not set-up and maintained, your Temporary / Seasonal Food Permit will be immediately revoked and you will be asked to leave the event.**

If you have any questions regarding the above conditions, call the Newton Health and Human Services Department at 617-796-1420 prior to the event.

**I have read, understand and agree to follow the above conditions**

Permit Holder Signature: \_\_\_\_\_

Print: \_\_\_\_\_ Date: \_\_\_\_\_

Email: [lwals@newtonma.gov](mailto:lwals@newtonma.gov)

**FOOD PREPARATION****TEMPORARY / SEASONAL FOOD ESTABLISHMENT**

List each food item and identify where each preparation procedure will take place at (or before) the Temporary / Seasonal Food Event / Establishment. Attach additional sheet if needed.

<b>FOOD ITEM</b>	<b>THAW HOW? WHERE?</b>	<b>CUT / WASH ASSEMBLE WHERE?</b>	<b>COLD HOLDING HOW? WHERE?</b>	<b>COOK HOW? WHERE?</b>	<b>HOT HOLDING HOW? WHERE?</b>	<b>REHEATING HOW? WHERE?</b>	<b>COMMERCIAL PRE-PACKAGE</b>